

# SHARE

STATE OF NEW MEXICO  
DEPARTMENT OF FINANCE AND ADMINISTRATION

## Warrant/Voucher Information Sheet

925

VENDOR #



DATE 06/07/2012

Payee

\$ 705.00



Fund / Agency

000 66500

Document Number

AP 00296283

B4R

COD3

B4RCOD3



State of New Mexico  
 Voucher Batch Report  
 BusinessUnit 66500 Department of Health  
 Vouchers with Final Agency Approval But Not Yet Reviewed/Approved By DFA/FCD  
 AsOfDate 05/31/2012  
 Voucher Vchr VchrLineDescr Distr Account Account Fund VendorName 1099 Accounting Period PurchaseOrder Invoice Number Total Amount  
 Number Line Line# Description Withhold Year Month

00296283	1	IS Meals & Lodging	1	542200	Employee I/S Meals & L	06101	MCGRATH BR-001	2012	05	0000088556	McGrath, B. 5.21	705.00
Total For Voucher											705.00	

**RECEIVED**  
 JUN 01 2012  
 DFA  
 FINANCIAL CONTROL

FCD Audit Bureau  
 Mycoiden

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AGENCY NAME New Mexico Department of Health

DATE 5/21/12

VOUCHER  
NUMBER

00 296283

NAME	Brad McGrath	CAR LICENSE NUMBER	GS-02222	POST OF DUTY	
SOCIAL SECURITY NUMBER		MODEL	Ford	Roswell	PROPOSED (ADVANCE VOUCHER)
NORMAL WORK DAY	8am	YEAR	2011	RESIDENCE	ACTUAL (RECOUPMENT VOUCHER)
	TO 5pm			Roswell	<input type="checkbox"/>
					<input checked="" type="checkbox"/>

DATE	TIME SHOW AM OR PM		CHARACTER OF EXPENDITURES ENTER DESTINATION, NATURE, OF OFFICIAL BUSINESS, PARTY CONTACTED AND MISCELLANEOUS	ODOMETER READINGS		AMOUNTS			
	DEPARTURE	ARRIVAL		ENTER START AND FINISH	NO. OF MILES	MILEAGE	PER DIEM	MISCELLANEOUS	TOTALS
5/21/12	8:00am		Depart Roswell to Santa Fe to meet with Cabinet Secretary Overnight Santa Fe rates apply				135.00	0	135.00
5/22/12			Overnight Santa Fe rates apply*				135.00	0	135.00
5/23/12			Overnight Santa fe rates apply*				135.00	0	135.00
5/24/12			Overnight Santa Fe rates apply*				135.00	0	135.00
5/25/12			Overnight Santa Fe rates apply*				135.00	0	135.00
5/26/12		8:00pm	Depart Santa Fe to Roswell Partial day per diem-12.0 hrs				30.00	0	30.00

PER DIEM IS BASED ON (CHECK ONE) ACTUAL <input type="checkbox"/> APPROVED RATES <input checked="" type="checkbox"/>		I certify that any payment sought on this voucher does not include reimbursement for alcoholic beverages; I further certify that no further payment will be sought for the travel/training covered by this voucher.		TOTALS		705.00		705.00	
Employee Signature		Date		Advance Amount @ 80%		Adjusted Reimbursement			


**X** Check here if this claim is in compliance with the Nonroutine Reassignment provisions of the DFA regulations Governing the Per Diem and Mileage Act.

GENERATED BY DOH - ITENIZED version 1.0.2


LAST MODIFIED ON: 05/22/2012 15:57

I, Brad McGrath

do solemnly swear that the above claim for reimbursement is just and true in all respects and complies with the  
DFA Regulations Governing the Per Diem and Mileage Act.

PAYEE SIGN HERE ☒  5-21-12

PAYEE SIGN HERE

X  the above claim for reimbursement is just and in accordance with the provisions of the Per Diem and Mileage Act.

5-21-12

MAY 30 12 AM 10:16

## Summary Invoice Information Payments Voucher Attributes Error Summary

Business Unit: 66500

Invoice Number: McGrath, B. 5.21-5.26.12

Voucher ID: 00296283

Invoice Date: 05/23/2012

Voucher Style: Regular

Total: 705.00

Vendor: MCGRATH, BRADLEY K



\*Pay Terms: Pay Now ☐ Schedule Payments ☐

Saved

OFFICE OF FACILITIES MANAGEMENT

SANTA FE, NM 87502

## Payment Information

Find | View All First 1 of 1 Last  

Scheduled Payment: 1

\*Remit to: Location: 001 \*Address: 1 MCGRATH, BRADLEY K  
OFFICE OF FACILITIES MANAGEMENT  
1190 S ST FRANCIS DR SUITE N-3059  
SANTA FE, NM 87502

Gross Amount: 705.00 USD

Discount: 0.00 USD ☐ Discount Denied

Late Charge

Scheduled Due: 05/23/2012 

Net Due: 05/23/2012

Discount Due:

Accounting Date:

## Payment Method

\*Bank: WFB10

\*Account: B

\*Method: CHK Check

Message:

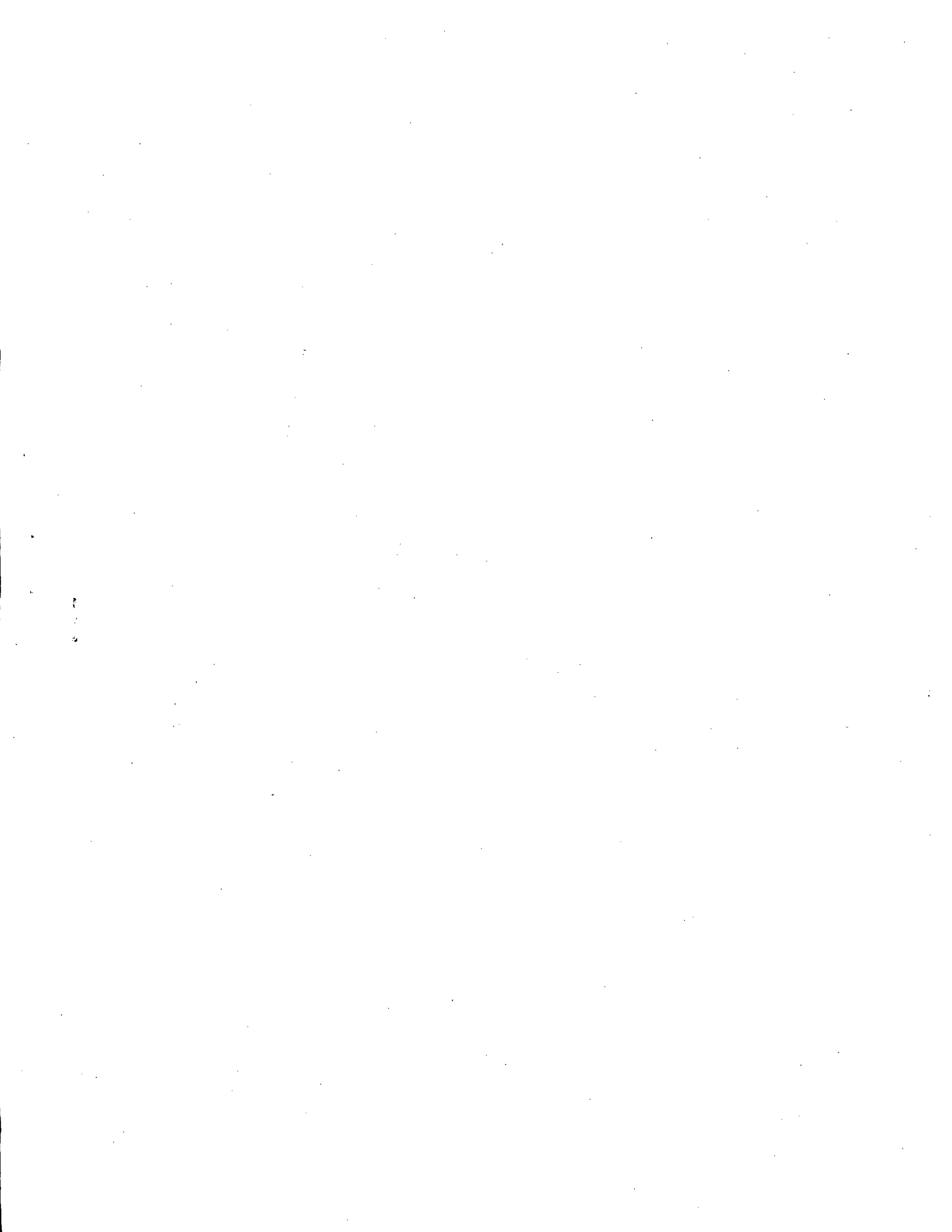
Message will appear on remittance advice.

Pay Group:

\*Handling: RE

\*Netting: N 

Messages





[Summary](#) | [Invoice Information](#) | [Payments](#) | [Voucher Attributes](#) | [Error Summary](#)

Business Unit: 66500      Invoice Number: McGrath, B. 5.21-5.26.12  
Voucher ID: 00296283      Invoice Date: 05/23/2012  
Voucher Style: Regular      Total: 705.00

Voucher Processing

☒ Post Voucher      ☐ Close Voucher  
☒ Revalue Voucher      ☐ Delete Voucher

Saved

Accounting Instructions

\*Accounting Template: STANDARD      Account At: Gross

Match Action

\*Status: Ready  
☐ Pay Unmatched Voucher

Transaction Currency

\*Source: Tables      \*Currency: USD      Rate Type: CRRNT      Exchange Rate: 1.00000000

Voucher Approval

\*Approval: Specify at this Level      Business Process: PROCESS\_VOUCHERS  
Approval Rule Set: Payment Approval Rule Set 1


Self Billing Invoice

\*SBI Num Option: Group Vouchers (Auto-Nur)      SBI Number:

Prepayment

Prepayment Reference:      ☐ Automatically Apply Prepayment      ☐ Postpone Withholding

Letter of Credit

Letter of Credit ID:      

Tax Group

